

Dr. Robert McClure: missionary-surgeon extraordinaire

Bill Trent

The man at the microphone surveys the audience of Rotarians as he speaks. His voice is strong and resonant, his blue eyes bright and twinkling. There is a youthful inquisitiveness in his face and something athletic in his stance.

That's Dr. Robert Baird McClure

more hackles than cheers and the one he is delivering now may just be one of those.

He is speaking out against Canada's adversary philosophy of life and what he sees as the myth of the self-made man with its emphasis on independence. "My privacy, my rights, my privileges as an individual." He scoffs at the words.

He has returned recently from a visit to the East with his wife Amy,

Canada to improve matters here. We would like to make Canada a better place to pass on to our children and grandchildren."

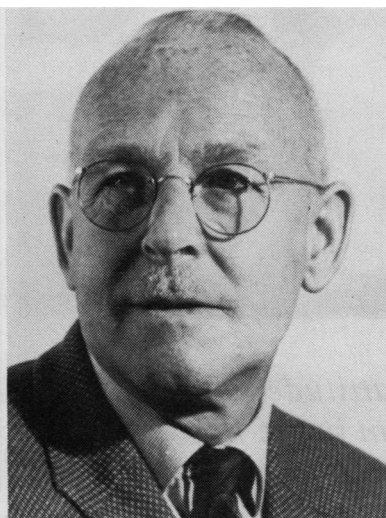
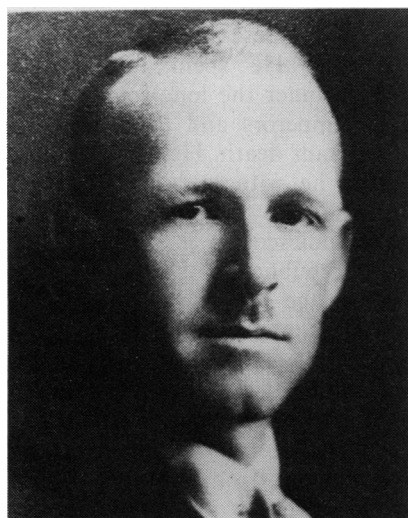
The meeting ends in applause. But did he get his message across? He shrugs. It's unpatriotic to knock the Canadian manner of doing things, he says. "The point is we're so terribly bigoted. We don't realize that we're not God's last word in creation."

Back in his apartment in east central Toronto, he prepares for his next public appearance. He averages 15 speeches a month but in October 1984, he gave a total of 26. He chuckles when someone suggests he keeps a hard-hitting schedule for a man of 84. He thrives on activity, he says. He will be speaking to service clubs, senior citizens and church and boys groups in several provinces this year and has already been booked for church talks on 20 Sundays.

Dr. McClure draws heavily on his intimate knowledge of China in many addresses. He does so, for example, when speaking to senior citizens. He tells them that old people in mainland China are encouraged to live together, and that many become surrogate grandparents, looking after neighbourhood children whose parents are at work. In Canadian society, the youngsters would be placed in day care centres.

Dr. McClure takes criticism of his views in stride. It comes mainly, he says, from the "true blues", the "vested interests"; people for whom the adversary system has always been a way of life. The criticism is aimed not just at himself but at his wife too, who has worked beside him all over the world.

Over the years, however, there has been more honour bestowed on this man than criticism. In 1968, he was elected moderator of the United Church of Canada, a rare tribute for someone who has never been ordained. He held this office until 1971 when he was made a Companion of the Order of Canada.



Dr. Robert Baird McClure: then and now

up there, missionary-surgeon extraordinaire in earlier years, at one time the only practitioner in inland China with radium for cancer treatment; a man who worked with witch doctors and among headhunters to bring modern medical services to some of the world's most primitive areas.

He has worked in India, in Borneo, on the Gaza Strip, in Egypt, in the Peruvian jungles and in the Caribbean and he has a wealth of stories. He can tell you what it's like to operate under fire, work between landmines, parachute into the wilderness to treat a patient and be held for execution.

Some of his stories, however, raise

83, and he has a message for Canadians: Look to the Asian experience, with its goal of cooperation rather than competition. There is something to be learned from it.

He has been widely criticized for his opposition to free-wheeling competition and knows he may well have critics in this very audience of businessmen. He and Mrs. McClure have found much to admire in their Asian travels, he says. Then, defensively, he adds, "Don't pass it off with that shallow rebuff, 'If the McClures like that society so much, why don't they go out there and live?'"

loyal Canadians. "But we see some trends in Canada that worry us", he explains. "At the same time we see some trends in other lands that look as though they might be adapted in

Mr. Trent is a freelance writer living in Lanark, Ontario.

In 1971, the Ontario legislature passed a resolution recognizing his outstanding achievements in China and elsewhere in the world. Moving the motion, Liberal Member Robert F. Nixon said, "we are very short of heroes. We are short of good examples. In my view, Dr. McClure's life, his attitude to life, and his service to mankind, rank him in the first order of both hero and good example."

Very Rev. Ernest M. Howse, a

counterparts in India knew anything at all about his dynamic few years in Gaza."

Dr. McClure doesn't believe in self analysis. "I've always been looking for adventure and I've seen a lot of it and had a wonderful life." Years ago, he developed a formula he called McClure's law, which reads: $A=r+p$, or Adventure equals risk with a purpose.

Later, McClure's law number two was created. It proclaimed that

when his mother returned to China. There he grew up, learning to speak Chinese before English. (He is fluent in both Mandarin and Taiwan dialects today.) At age 15, he came to Canada for medical studies, graduating from the University of Toronto in 1922 and interning for a year in surgery.

In 1923, he returned to China with a posting to the United Church of Canada Mission Hospital at Hwaiking, where he became known to Chinese colleagues as *Loa Tai-fu*. (*Loa* is a corruption of McClure, with the Mc sound dropped. *Tai-fu* means doctor.) It was the beginning of 25 years of medical service to China — a quarter century crammed with all the adventure he had set out to find.

Young Bob McClure had seen a lot of Chinese history in his short lifetime. He spent his childhood years under the long-reigning Manchukuo emperors and knew something of instant death. He was 8-years-old when he witnessed his first public beheading by broad sword. He spent his adolescence in the struggling first republic. He started his career in the age of the warlords, a period of rampant violence by power hungry local rulers claiming some sort of military following.

In the mission hospital he dodged bullets. Literally, his territory was primitive, bandit-infested country where running gun battles between police and highwaymen were daily occurrences. Both sides were playing a deadly game and anything could happen. The missionary doctor he had come to replace was an example of that. He had been murdered. Bob McClure was reminded of his predecessor's fate daily since he had to walk past his grave in the mission compound.

"We averaged one gunshot wound a day every day for several years", he recalls. The hospital was never without a list of wounded, both policemen and bandits. Gunfights took place in the open but police often raided the wards, rifles cocked and ready. They would pull patients out of their beds, drag them outdoors and execute them.

The doctor maintained a semblance of order by keeping police and bandit patients in separate wards. He also made sure that every



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retired past moderator of the United Church, who had known Dr. McClure in India, says flatly, "He is a man of tremendous diversity of talent. I would say he is one of the most notable Canadians of the 20th century".

Munroe Scott, author of a two-volume biography of the doctor, *McClure, The China Years* and *McClure, Years of Challenge* (Carnegie Publishing and Supply House, Toronto), says the McClure personality denies pomp, reverence and sophisticated ornamentation. In fact, he points out that, during the years Dr. McClure was moderator, he was the least known public figure in Canada.

"Those who knew a great deal about his life and adventures in China knew very little about his work in India and vice versa", he said. "Neither the Chinese nor their

satisfaction gained from a job is in inverse proportion to the money earned. It was a statement that baffled, rather than enlightened, those who heard it. Munroe Scott finally settled for this explanation: "Satisfaction equals service over income." It pretty well summed up the doctor who always placed humanitarian acts ahead of money making.

Dr. McClure was born in Portland, Ore., in 1900. The son of Canadian medical missionary Dr. William McClure of Lachute, PQ., a pioneer doctor of the Canadian Presbyterian Mission in North Homan, he would have been born in China except for an accident of history. His mother, an American missionary, had gone back to the United States to escape the Boxer Rebellion and gave birth as her ship pulled into Portland.

Bob McClure was 6 months old

incoming patient, lawman or law-breaker checked his firearms as he passed through the admitting office. Not everyone knew it but Dr. McClure packed a .45 on his hip in case things got out of hand.

Operating to remove bullets earned him the thanks of many robbers but saving the lives of bandit children, stricken with parasitic disease, earned him their eternal gratitude. In fact, it may have saved his life — not from disease but from a rifle shot.

The disease was kala-azar. It was not unusual to find it in China. What interested Bob McClure was that it seemed to attack Moslem children more frequently than other youngsters. Why, he didn't know, but the condition could be cured. The problem was to get its victims to hospital without delay. It was a message he would carry one day into a village of Moslem bandits, deep in bamboo country near Chinghua.

It was a dangerous area. Robberies and murders were frequent. Danger, however, didn't deter this man. It whetted his appetite for adventure. He spoke to the village elders in fluent Mandarin, tinged with the North Honan accent of his father's mission. He was Loa Tai-fu, he explained, coming to say there was help for those with kala-azar. As it happened, one of the children he had treated was there with the men, so he inquired about his health. He was fine, one of the men replied, pleased to be speaking to the doctor who had performed the cure.

Bob McClure then made his pitch. The hospital of the *Jesus people* (as some called it) was open to Moslems as well as Christians, and he hoped they would bring their sick and wounded to him. In return, he hoped the bamboo people would allow him to cycle freely past their groves without fear of attack. The elders thought it was a good idea. In the months to come, hundreds of patients would flock to the mission hospital: children with kala-azar, injured bamboo cutters and wounded robbers. Loa Tai-fu looked after them all — and rode his bicycle without incident all over bamboo country.

It struck him as strangely humorous one day as he made his rounds.

Most of the people he had treated were either bandits or their children. He wondered what his United Church friends in Canada would think of this.

In 1926, he asked the former Amy Hislop, of Whitby, Ont., a nurse he had known in student days, to come to China to marry him. She did and they exchanged vows in Tientsin. She was to be his steadfast companion and supporter through most of his years of international

Two more McClure children, Patricia and Josephine, were born and Dr. McClure, who had been spreading family planning education among the Chinese, decided to practise what he had been preaching. He had a vasectomy performed on himself.

When the Sino-Japanese War broke out in 1937, he found himself in the midst of it, on loan by the United Church to the International Red Cross (IRC), which named him



Dr. and Mrs. R.B. McClure and family: Douglas and Norah (back), Josephine and Patricia

postings. Today, 59 years later, she still travels with him.

With civil war raging in China, he closed his hospital in 1927 and left with his wife for Taiwan, where he worked with lepers. There, two McClure children were born, Norah in 1927 and Douglas the next year. In 1930, he was in London for specialist studies in gynecology and became interested in family planning. Later, he studied radiology as a cancer therapy. He was awarded an FRCS from the University of Edinburgh in Scotland.

In 1931, the McClures were back in Hwaiking, where he put his knowledge of radiation therapy to work in the new Menzies Memorial Hospital. (The late Vincent Massey, Canada's first native-born Governor General, and his friends were among the first to finance the purchase of radium supplies for him.)

field director for central China. In 1938, he was the only foreigner in the Chinese delegation to the IRC world conference in London. Later that year, travelling through a Chinese war zone, he was arrested as a Russian spy and told he would be shot. He managed to establish his identity to an officer before he could be led out to the firing squad. In 1941, he accepted the post of director of the Friends' Ambulance Unit, a Quaker group, and remained in China until 1948 when the communists took over.

Bob McClure contributed much to the health needs of China but it was his work in developing a rural medical system that he most likes reminiscing about. He established a network of nongraduate medical practitioners — "quack doctors", he called them — one in each of seven county towns, who worked in con-

junction with the hospital. They got their supplies from him and handled ordinary cases in their own areas. Cases requiring advanced treatment or surgery, however, were sent on to the hospital.

"The country medical system worked so well that people came from all over China to inspect it", he says. "It worked marvellously. It meant that no one in the region was more than 24 km from medical care."

"In those days, we all carried sulfa tablets and morphine. I carried mine in a Nugget shoe polish tin. We figured that if we were ever hit, we could give ourselves some morphine and take a few sulfanilamide tablets and we'd have a sporting chance. Well, one day Bethune got an infected finger from operating on an empyema — we had no rubber gloves then — and it turned out he had used all his supplies on his wounded soldiers. He died for lack

partial to the communists (he would learn later that they had blacklisted him) but as a doctor, he had a duty to provide aid to the wounded.

His energy knew no bounds. When the north of China fell to the Japanese, he went to the southwest to organize a Red Cross trucking route over which supplies could be delivered to free China. He was one of the first to drive a truck the entire length of the Burma Road, traversing ancient tribal kingdoms. When the road closed later, supplies were airlifted from India over the Himalayan Hump and he found himself another job — pioneering air-to-ground rescue work in the mountains.

It was hectic. Planes flew the Hump minutes apart. Many ran into trouble. Pilots crash landed in the wilderness, or parachuted into it and became lost. McClure visited the tribesmen and won their cooperation. They agreed to act as stretcher bearers in the event of accidents. He remembers the day he joined a US Air Force DC-3 crew on a mission. They spotted a man below and circled the area. The pilot dropped a walkie-talkie to him and McClure talked to him. Was he injured? he wanted to know.

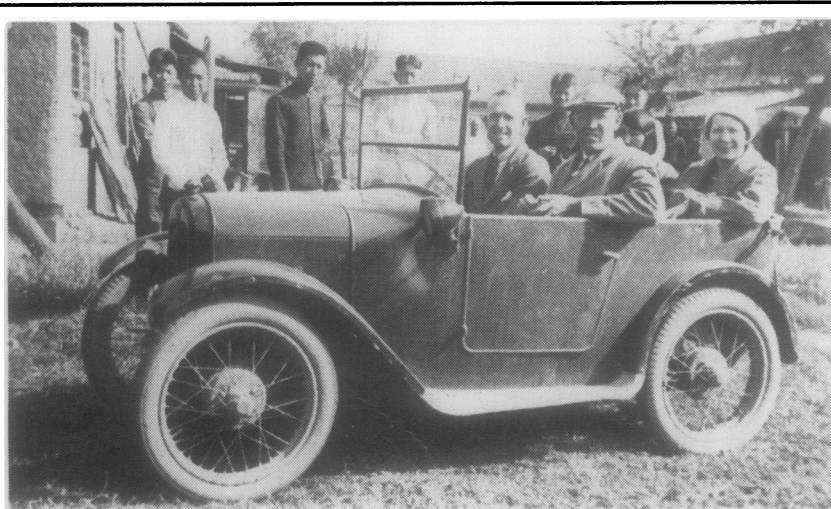
The downed airman said he had jumped and a strap of his parachute harness had broken and ruptured his urethra. McClure gulped. This wasn't normal air force talk. Obviously, the man below was a doctor.

"I haven't got a catheter and it's too late to go find one in India or China", McClure said into the walkie-talkie. "Can you hold your water until tomorrow morning?"

"I'll hold it", the voice came back, "but be sure you're back really early tomorrow."

The next morning, true to his word, McClure was on the scene. He parachuted from the DC-3 (he had learned to jump in Toronto), and put the catheter to work to the great relief of his patient who later was carried out by stretcher bearers. The patient was an American aviator and a medical student back home.

The communists were approaching Hankow when Dr. McClure moved out. He headed directly for Toronto where he spent 1½ years in surgery and gynecology in a group



Dr. McClure's rural medical system, supplemented by the use of nongraduate medical practitioners, ensured that no one in the region was more than 24 km from medical care.

All through the years, he worked with the Chinese as colleagues — they looked after business and collected fees from patients. It was different with China's most famous Canadian, Dr. Norman Bethune. Where Dr. Bethune operated, he was boss.

The two doctors met briefly in 1938. Dr. Bethune was passing through the Hwaiking area on his way to communist territory and lost his way. "When he got lost, he got confused and hit the bottle", Dr. McClure explains. "I got him after he'd been under for about 2 or 3 weeks and we dried him out." The Chinese loved him, he says, because he was a card-carrying communist with a letter from Canadian leader Tim Buck and certificates from the Spanish Civil War. That was not to deny, however, that he was a heroic man. He relates this anecdote:

of perhaps 50¢ worth of sulfa."

Life was getting complicated in those last years. The communists, he learned, had put a price on his head. The nationalists, on the other hand, objected to the fact that he had treated wounded communists.

He was confronted one day by no less a personage than Madame Chiang Kai-shek, wife of China's nationalist leader, with whom he had been working closely for some time.

"You're giving drugs to the communists", she charged.

"As long as they get wounded by the Japanese, I'll give them drugs", he replied.

"You know they are our enemy."

"I can't help it."

"Well, you're no longer a friend of mine then."

It was the end of a long association. Dr. McClure had never been

practice. It was, he admitted, a dull life after China and the Burma Road. In 1950, the Church Missionary Society in England ended the boredom. It sent him to the Gaza Strip to serve in its hospital there.

"It was a missionary doctor's dream", he says. "We had free treatment for everybody and we just sent out our hospital accounts and the United Nations footed the bill." The Gaza appointment, however, also had a less pleasant side to it. He adds, "We were surrounded by barbed wire, minefields and machinegun posts. If you stayed out late at night, they'd take potshots at you." One of the hospital staff, he recalls, had both feet blown off by a mine.

He had gone to Gaza for 1 year and had been there for 4 years. Discouraged at not being replaced, he wrote to the head of the mission in London. "If the Anglican mission can't find staff, it had better sell the hospital", he said. Five days later, a telegram arrived from London. "Sell hospital", it said. The message surprised him. "I'd been talking rhetorically", he says now, "but they were serious. It was the first time in my life I had sold a hospital. I sold it to the American Southern Baptists and they've been running it ever since as a thriving hospital."

In 1954, there was a new assignment. The United Church sent him to its 100-bed hospital at Ratlam in central India, where he spent the next 13 years. The centre had been doing mostly minor surgery but it was not long before McClure and his staff of Indian doctors (and some Canadian nurses) were doing major operations. "We built up the hospital so that instead of doing 400 operations a year, we were doing 1100, 60% of them major", he says.

He was an expert in the treatment of fractures and it soon became known that Ratlam Christian Hospital was the place to go if you had one. It was a matter of pride among the staff that someone with a fractured femur could be x-rayed, be given an anesthetic, have his bones pinned with traction wire and his leg put up on a Balkan frame, all within a period of 30 minutes — even if it were the middle of the night.

Dr. McClure's boundless energy, however, couldn't be contained in

the operating room. It had to spill over. Soon he was deeply involved in family planning, a cause he had espoused in China. It was a work that would become one of his major contributions to India.

There had always been disagreement among missionaries about birth control, many believing it was like playing God. He didn't see it that way. With the population of India increasing at the rate of 6 million people a year, there was an

Church for a 3-year term. In 1971, he went to southeast Asia as an OXFAM volunteer to do a family planning survey. Deciding then that idle retirement was not for him, he went looking for a job. The Chinese Methodist bishop of Singapore obliged, sending him to the American Methodist mission hospital in Sarawak, North Borneo. This institution was caring for some 25 000 members of the Iban tribe, a primitive group once known as the head-



Dr. McClure and a group of Chinese doctors in Honan, China.

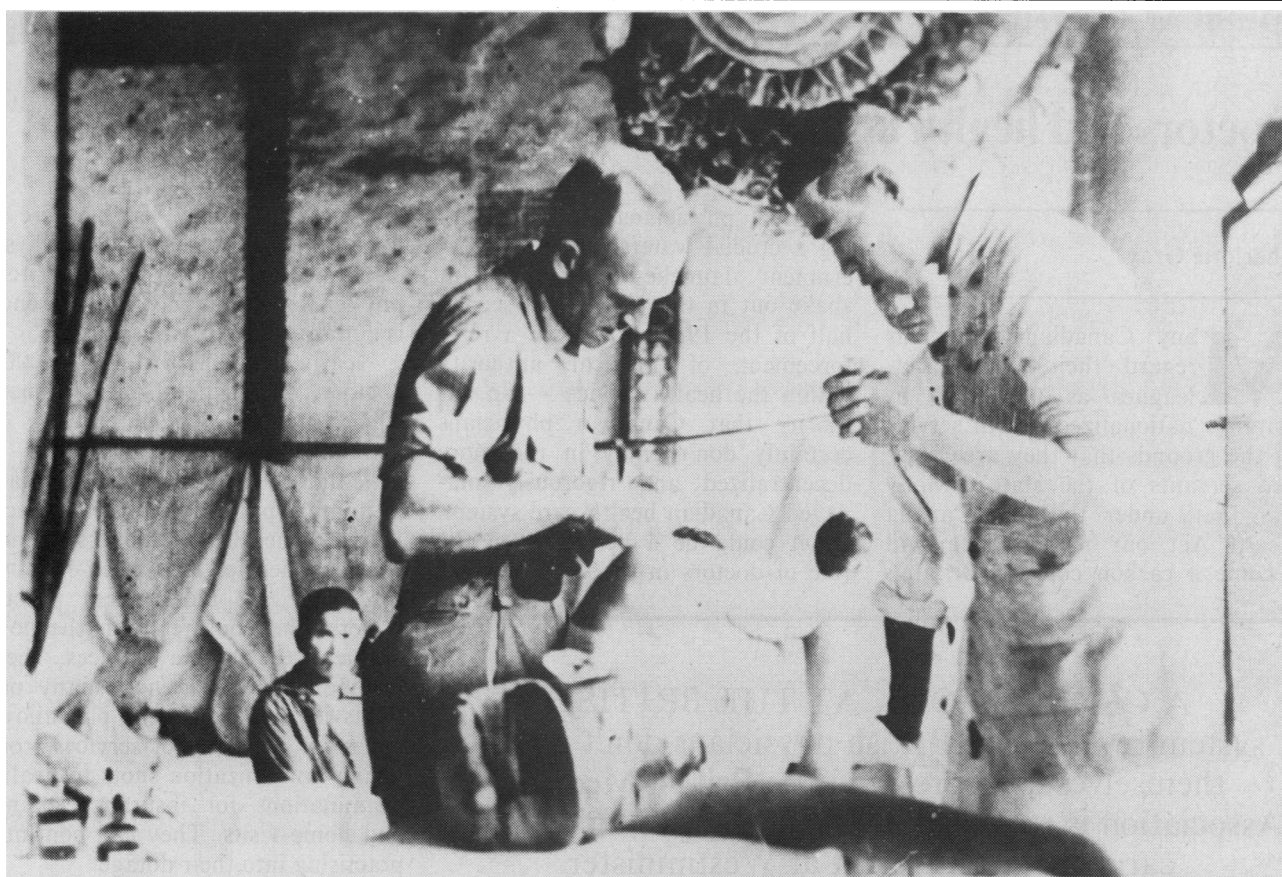
acute need for it. He lobbied and pressured for family planning. He preached planning to his colleagues. He urged the use of saline tampons and the loop for contraception. Under certain conditions, he recommended vasectomies for men and tubal ligation for women. At his instigation, the Christian Medical Association encouraged establishment of family planning units in its member hospitals and found funds to subsidize sterilizations and loop installations. It was no secret in medical circles: he had become engulfed in the cause. He had become haunted by the spectre of thousands dying of starvation in a vastly overpopulated country.

In 1967, he returned to Toronto to retire. Eager for activity, however, he toured Canada raising funds for mission work. Then, in 1968, he was named moderator of the United

hunters of Borneo.

The big medical problem in the tribe was tetanus neonatorum and he used a \$1000 donation from a group of Toronto churchwomen to mount a campaign of prevention. Since the tribe's witchdoctors had the confidence of the people, he worked through them. "We treated them like colleagues", he says. "We told them we were both concerned with the same thing — the welfare of the people."

With the help of his new colleagues, he spread the antitetanus message through the tribe. Education was the basis of the whole effort. The people had to be taught the meaning of prevention. He developed a package he called *Atuck*, the letters spelling antitetanus umbilical cord kit. It consisted of kindergarten scissors, two small pieces of string to tie the placental and



Working to save the lives of policemen, highwaymen or bandits, and their children, probably protected Dr. McClure's life in strife-torn China.

fetal ends of the cord, some antiseptic powder to put on the end of the cord and a small air raid dressing. Mobile teams then went around the territory distributing the kits and teaching tribe members how to tie the cord without risk of infection. As a teaching aid, he had drilled a hole in a doll and placed an imitation umbilical cord inside. Later, he helped produce a film which told the whole story of prevention. It was shown to everyone in the area. By 1983, when he returned for a visit, there was not one case of infantile tetanus in the entire Iban tribe.

In 1975, he was working in an entirely different setting. He had answered a call from the Amazon Hospital Association and was traveling up and down the jungle rivers of Peru, inoculating natives.

The following year, he was on the Caribbean island of St. Vincent where he launched a program of tubal ligation. There was resistance to the idea of a foreign doctor on the island and he left after 6 weeks. His program was kept operative, however, and by early 1984, island offi-

cials claimed a 20% drop in the birth rate.

In 1977, he volunteered his services as a surgeon at l'Institut Médical Evangelique at Kimpese, Zaire. He was there for only 4 months but managed to perform more than 300 operations. He himself admits that wasn't bad for a man approaching his 77th birthday.

Zaire spelled new excitement. It was like old times with emergency flights to rescue the sick and wounded. And he liked to take the controls of the plane on some of them. "There was this man with a ruptured gastric ulcer", he says. "We saved him many hours of suffering by taking the Cessna-185." Then there were the casualties from Angola. "It was marvellous digging out shrapnel again, just as we had done during the war."

Finally, in the summer of 1978, he did what he calls his swan song. He spent a few months treating Indians at the United Church clinic at Fort Simpson in northern British Columbia and then returned to Toronto to settle down. Well, settle

down McClure style.

"First you look behind and see what you've learned. Next, you look ahead at what's in store and plan to apply what you've learned. An older person must never slacken off. Never. I can't parachute anymore and I won't be flying a plane again. But there is plenty of adventure left in the world and I'm ready for it."

Bob McClure is at home in Toronto, talking about his new life, giving speeches all over the country and leading tourist groups to some of the far-flung places he knows so well. The trips, arranged by Christian Tour and Travel, took him back to China in 1981, Indian in 1982, Borneo in 1983 and China again in 1984. This year, he will guide a tour to the upper reaches of the Burma Road.

"The thing is this: If I get a kick out of it, I do it. If I don't, I quit. I tell students they should look for adventure in life. They may not make much money but they'll have a lot of fun. And, most important, they'll be helping others." And isn't that what life is all about? ■